

## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

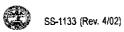
# For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 9-30-14 2.a. NAME OF CANDIDATE OR C RANDY FAIR	DANKS
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE Aug 7 2014
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route + City 1001) Rolling Wind DR Soddy Do	State Zip Code Phone (A154 TN 37379 423-843-5026
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State Zip Code Phone
HAM Co. Commissione - DIST 1	BILL Regers
7. CATEGORY OR REPORT (Check one)	PRE- MID-YEAR YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD 8.b. ENDING	DATE OF REPORTING PERIOD  - 30 - 14
9. (Check one)	
<ul> <li>This campaign is exempt from detailed disclosure because contributions tures total \$1,000 or less for this reporting period. (Complete items 12d.</li> </ul>	(including in-kind) received total \$1,000 or less AND expendi- , 12e. and 12f.)
b. This campaign is required to file a detailed financial disclosure because and/or expenditures total more than \$1,000 for this reporting period.	contributions (including in-kind) received total more than \$1,000
10. I/we do solemnly swear or affirm that the information contained in this campai accurate accounting of campaign contributions and expenditures required to be Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions in the campaign of the candidate or for any other nonpolitical purpose as defined by the Signature of candidate    10 - 1 - 14	e reported by the candidate committee by the Campaign
11. WITNESS SIGNATURE  Signature of witness  date	signature of witness 10-1-14 date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	s <u>3248.89</u>
b. TOTAL RECEIPTS THIS PERIOD	s <u>5950.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	s <u>9070.96</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	s <u>121.93</u>
e. TOTAL LOANS OUTSTANDING	ss
f. TOTAL OBLIGATIONS OUTSTANDING 9-130 5107	\$\$



## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)			ERING THE PERIOD						
RANDY FAIRBANKS		FROM: 7-29-14	TO: 9-30-14						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)									
a. Unitemized Contributions (\$100 or less from each source this pe	riod)	\$	_ <del>_</del>						
b. Itemized Contributions (over \$100 from each source this period)	***************************************	s <u>5730.00</u>	) -						
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)								
16. LOANS RECEIVED THIS REPORTING PERIOD		,	\$						
17. INTEREST RECEIVED THIS REPORTING PERIOD		•••••	\$						
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item	n 12.b.)		\$ <u>5950.∞</u>						
DISBURSEMENTS									
19. EXPENDITURES (other than loan payments)									
a. Expenditures (\$100 or less each payee this period) (must be listed	by category -	e.g., printing, postage,	gasoline)						
BANK Fee	\$ <u> </u>	.00							
<u>Supplies</u>	\$ <u>70.</u>	<u>76                                    </u>							
Food-Workers	\$ 90	.26							
	\$								
	\$								
	\$								
	\$								
	\$								
	\$								
		11.0.0							
Total of Expenditures (\$100 or less each payee)		1 . (1 /	<u>d</u>						
b. Itemized Expenditures (Over \$100 each payee this period)			1,0096						
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a.	and 19.b.)		======================================						
20. LOAN REPAYMENTS MADE THIS PERIOD			\$ <u>2650.80</u>						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in	item 12.c.)		\$ <u>40,70.96</u>						
22.IN-KIND CONTRIBUTIONS									
a. Unitemized in-kind contributions (\$100 or less from each source the	is period)	\$							
b. Itemized in-kind contributions (over \$100 from each source this pe	riod)	\$							
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (ac	ld 22.a. and 22	.b.)	\$						
23. OBLIGATIONS									
a. Uniternized Obligations Outstanding (\$100 or less each)		\$	_						
b. Itemized Obligations Outstanding (Over \$100 each)		\$	_						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (mus	st be shown i ite	em 12.f.)	\$						



## **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE RANGY FA	RING THE PERIOD TO: 9-30-14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTI	Amount O		
4 COMPLETE THE APPROPRIATE ITEMS FOR EA	or)		
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Iron Worlkers Local Address 2115 Belle Arbor		☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)	3,000.00
Chatta	77 37406	Date of Contribution	Aggregate This Election
Occupation Employer		7-30-14	3000.00
First Name   Al Araba	Middle Name	Contribution Received For:	Amount of Contribution
Last Name: Organization Name Rhodes Address 5828 N. Park Rd	2	Primary Election General Election  Runoff (Local Elections Only)	100.00
an Hixson	7N 237343	Date of Contribution	Aggregate This Election
Optometrist Employer SELF		8-4-14	100.00
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name Organization Name Committee to Elect Address 7004 River Run	Claude Ramsey DR	Primary Election	500.00
Challa	State Zip Code 37416	Date of Contribution	Aggregate This Election
Occupation Refired Employer		8-4-14	500.00
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name Organization Name Committee to Elect / Address 1122 Charwood	Marty Haywes LN	Primary Election General Election  Runoff (Local Elections Only)	250.00
CTY Hixson	Same Zio Sone 373 43	Date of Contribution	Aggregate This Election
Occupation .		8-4-14	250.00
Employer			
TOTAL ITEMIZED CONTRIBUTIONS     (Carry forward to item 3, of next page if additional pages (If this is the last page of contributions, this amount mus			3850.00

## **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE RANDY	TO: 9-30-14					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	Amount 3850.00					
4. COMPLETE THE APPROPRIATE ITEMS FOR E			<u> </u>			
First Name	Middle Name	Contribution Received For:	Amount of Contribution			
Last Name/Organization Name	eet NW	☐ Primary Election ☑  Runoff (Local Elections	1000.00			
City WAShmyton	State Zip Code	Date of Contribution		Aggregate This Election		
Occupation Employer		8-4-1	1000.00			
First Name	Middle Name	Contribution Received For:	_	Amount of Contribution		
Norma Last Name/Organization Name HAYNES Address 4-14 Forest PLA		☐ Primary Election ☐ Runoff (Local Elections	General Election  Gonly)	100.00		
City Hixson	State Zip Code 37343	Date of Contribution	Aggregate This Election			
Coccupation Retired Employer		8-4-14	100.00			
First Name	Middle Name	Contribution Received For:		And to the		
Last Name/Organization Name	VIGNIC HOUSE	·	General Election	Amount of Contribution		
Chatta Homebuilde	ers Assoc.		·	1000-00		
Address 3221 Harrison		Runoff (Local Elections	7000.00			
Chatta	State   Zip Code   37406	Date of Contribution	Aggregate This Election			
Occupation		8-30-19	4	1000.00		
Employer						
First Name	Middle Name	Contribution Received For:	-	Amount of Contribution		
Last Name/Organization Name		☐ Primary Election ☐	General Election			
Address		Runoff (Local Elections	Only)			
City	Date of Contribution	Aggregate This Election				
Occupation	<u>'</u>					
Employer						
TOTAL ITEMIZED CONTRIBUTIONS     (Carry forward to item 3. of next page if additional pages or (If this is the last page of contributions, this amount must be added to the contributions).				5950.00		

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	FAIRBANKS		2. REPORT COVER	TO: 9-30-14			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU		E /antor \$0 if first its mineral no		Amount O			
4. COMPLETE THE APPROPRIATE ITEMS FOR E		<del>- i</del>	<del>* '</del>	L			
First Name	Middle Name	Purpose of Expenditure	· ·	Amount of Expenditure			
Last Name/Business Name . 50 day Daisy Lachy TRI		Donati	e Len -	300.∞			
	ccess Rd	Donaii	ion	300.00			
Soddy Baisy	State Zip Code 37374						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name  Lmage works			•	(4)			
Address 35305. Broad St		Mail Pr	iece	610.07			
chatta	State Zip Code 37409						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name US POST Office							
Address 302 Northgate N	NallDR	Postage	1363.40				
City Hixson	State Zip Code <b>T</b> ₩ <b>37343</b>						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Chatt Times Free 1		Advertis	*	1100 00			
	Street	Havertis	<u>"</u>	1110.00			
Chatta	TN 37403						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name  Mountain City Cofe  Address  / SUC Participation		Food	-	340.00			
city Hirson	State Zip Code 373 43						
First Name Vince	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name, Butler							
Address 6504 LAIG Shad	ows Circle	Consult	ing	/000.00			
City Hixson	State Zip Code 37343						
TOTAL ITEMIZED EXPENDITURES  (Carry forward to item 3. of next page if additional pages of little is the last page of expenditures, this amount must	of this form are used.)			4843.47			

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	AIRBANKS		2. REPORT COVE	RING THE PERIOD TO: 9-30-14		
	Amount					
TOTAL ITEMIZED CAMPAIGN EXPENDITAL     COMPLETE THE APPROPRIATE ITEMS FOR	4843.47					
First Name	Amount of Expenditure					
Last Name/Business Name		Purpose of Expenditure				
Staples	<del></del>	Sundia		100 20		
Address 5450 Hay 153		Supplie	/10.36			
City Hixson	Siate   Zin Gode 373 43					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Bysiness Name . Soddy Da 154 BAND A	Boostens	1 .	•			
Addroce	ccess Rd	Donat	ion	25.00		
Soddy Daisy	State Zip Code 37379					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name  Office Depot		1	•			
Address 5756 Hay 153		Suppli	198.76			
Hixson	State	<b>†</b>				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Murphy USA						
Address 9334 Dayton Pill	<del>,</del>	Gas	139.83			
city Soddy Da 154	Stale Zip Code 77 37379	-				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Dial My Calls		Phone G	110	135.00		
Address 1010 E. Indian	TORN RR	) phone c.	YL 3	105.00		
City Japiter	State Zip Code 33417					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Bysiness Name Steves LANding		1111 -				
Address 1145 Poliny Cir	144.52					
Soddy Daisy	State Zip Code 37379					
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page	e of this form are used 1			6256.94		
(Larry forward to item 3, or next page if additional page (If this is the last page of expenditures, this amount mu	•			Dec. 11		

#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD							
RANDY FAIRBANKS					FROM: 10: 9-30-			9-30-14				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)												
Complete the Following for the Source of	Complete the Following for the Source of the Loan											
First Name	Middle Name	1		Outstanding L (Beginning o		Loans Receive		Loar				Loan Balance of Period)
Last Name/Organization Name /										(2110		
Last Name/Organization Name							6				_	<u> </u>
Address 10011 Rolling Wind DR   Loan Received												
Sodely Daisy	State 7~	Zip Code 3737	9	☐ Runoff (	Local Elections	Only)						
/ Lis			ntors fo	or Above Loa		ice is needed	d please a	ttach a	page)			
First Name		Middle Name			First Name					Middle	Name	
Last Name/Organization Name					Last Name/Or	ganization Nar	me					
Address					Address							
City		State	Zip Co	ode	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name		Middle Name			First Name Middle Name							
Last Name/Organization Name			Last Name/Organization Name									
Address				Address								
City		State	Zip Co	ode	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guara	inteed Outstan	ding					
First Name		Middle Name			First Name					Middle	Name	1
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City		State	Zip Ci	ode	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name		Middle Name			First Name Middle Name							
Last Name/Organization Name					Last Name/Or	ganization Nar	me					
Address					Address							
City		State	Zip C	ode	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
4. Totals for all Loans (complete on la					Outstanding L		Loan		Loar			standing Loan Balance (End of Period)
(Total loans received should also be shown in (Total loan payments should also be shown in	item 20. on su	ımmary page.)	1		(Beginning		Recei	veu	Payme 265			(End of Period)
(Total outstanding loan balance should also be	arrown in item	iz.e. on front p	raye.)									